

(1) OWNER: Name MADRONA BEACH Address CAMPANO ISLAND

(2) LOCATION OF WELL: County ISLAND — 1/4 — 1/4 Sec 34 T 32 N. R. 2 W M

Bearing and distance from section or subdivision corner \_\_\_\_\_

(3) **PROPOSED USE:** Domestic ☐ Industrial ☐ Municipal ☒  
Irrigation ☐ Test Well ☐ Other ☐

(4) TYPE OF WORK: Owner's number of well (if more than one) 2

New well	<input checked="" type="checkbox"/>	Method: Dug	<input type="checkbox"/>	Bored	<input type="checkbox"/>
Deepened	<input type="checkbox"/>	Cable	<input checked="" type="checkbox"/>	Driven	<input type="checkbox"/>
Reconditioned	<input type="checkbox"/>	Rotary	<input type="checkbox"/>	Jetted	<input type="checkbox"/>

(5) **DIMENSIONS:** Diameter of well 6 inches.  
 Drilled 500-4 ft. Depth of completed well 500-4 ft.

**(6) CONSTRUCTION DETAILS:**

**Casing installed:** 8 " Diam. from 0 ft. to 420 ft.  
 Threaded ☐ 6 " Diam. from 0 ft. to 500 ft.  
 Welded ☒ " Diam. from . ft. to . ft.

**Perforations:** Yes ☐ No ☒

Type of perforator used.....

SIZE of perforations..... in. by..... in.

..... perforations from..... ft. to..... ft.

..... perforations from..... ft. to..... ft.

..... perforations from..... ft. to..... ft.

**Screens:** Yes ☒ No ☐

Manufacturer's Name JOHNSON  
Type STAINLESS STEEL Model No. \_\_\_\_\_  
Diam. 6" Slot size 14 from 490 ft. to 495 ft.  
Diam. 6" Slot size 14 from 495 ft. to 500 ft.

Gravel packed: Yes ☐ No ☒ Size of gravel: .....  
Gravel placed from ..... ft. to ..... ft.

**Surface seal:** Yes ☒ No ☐ To what depth? 15 m  
Material used in seal Bentonite  
Did any strata contain unusable water? Yes ☐ No ☒  
Type of water?                      Depth of strata                       
Method of sealing strata off                     

(7) **PUMP:** Manufacturer's Name.....  
Type: ..... **HP** .....

(8) **WATER LEVELS:** Land-surface elevation above mean sea level... 300 ft.  
 Static level 216 ft. below top of well Date 2/5/82  
 Artesian pressure \_\_\_\_\_ lbs. per square inch Date \_\_\_\_\_  
 Artesian water is controlled by \_\_\_\_\_ (Cap. valve, etc.)

**(9) WELL TESTS:** Drawdown is amount water level is lowered below static level

Was a pump test made? Yes ☒ No ☐ If yes, by whom? Driller

Yield: 115 gal./min. with 90 ft. drawdown after 4 hrs

" " " "

" " " "

" " " "

Recovery data (time taken as zero when pump turned off) (water level measured from well top to water level)

Time	Water Level	Time	Water Level	Time	Water Level
1200	300	1215	240	1230	227
1205	270	1220	235	1235	220
1210	250	1225	230	1240	215

Date of test 2/5/82  
 Bailer test. 10 gal./min. with 0 ft. drawdown after 2 hrs.  
 Artesian flow.                      g.p.m. Date                       
 Temperature of water. 52 Was a chemical analysis made? Yes ☒ No ☐

**(10) WELL LOG:**

**Formation:** Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

MATERIAL	FROM	TO
SANDY CLAY	0	65
HARD PAN	65	70
SANDY CLAY	70	195
BLUE CLAY	195	280
SILTY CLAY	280	335
BLUE CLAY	335	346
SILTY CLAY	346	385
FINE SAND (DRY)	385	400
CLAYEY SAND	400	425
SILTY SAND	425	450
FINE SAND AND WATER	450	500

Work started NOV 23, 1981 Completed Feb 5, 1982

**WELL DRILLER'S STATEMENT:**

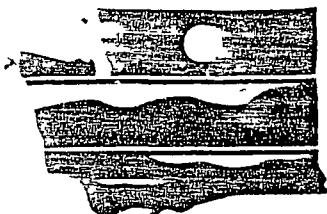
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

NAME Kaukel Well Drilling  
(Person, firm, or corporation) (Type or print)

Address 797 W. Smith Rd.

[Signed] Larry Kunkel  
(Well Driller)

License No. 1174 Date 2/5/, 1982



WASHINGTON STATE  
DEPARTMENT OF  
ECOLOGY

# Well Tagging Form

Unique Well Tag No: \_\_\_\_\_

AGA738

## RECORD VERIFICATION (check one)

- ☐ Well Report available (please attach this form to the well report and submit it to the Ecology Regional Office near you)
- ☐ Verification inconclusive
- ☐ Well Report not available

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## WELL OWNERSHIP, IF DIFFERENT FROM WELL REPORT

First Name MADRONA BEACH CUM Last Name \_\_\_\_\_  
W S 49954-7  
 Street Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_

## LOCATION OF WELL, IF DIFFERENT FROM WELL REPORT

Well Address NEXT TO ZOSN GREENVIEW RD  
 City \_\_\_\_\_ County \_\_\_\_\_  
 T \_\_\_\_\_ N R \_\_\_\_\_ W M Sec \_\_\_\_\_ 1/4 of the \_\_\_\_\_

## FOR AGENCY USE ONLY

Latitude \_\_\_\_\_  
 Longitude \_\_\_\_\_

Elevation at land surface \_\_\_\_\_ feet/meters (circle one)

Additional information, if available

- ☐ GPS
- ☐ Topographic Map
- ☐ Survey
- ☐ Computer generated
- ☐ Digital Altimeter
- ☐ Topographic Map
- ☐ Other \_\_\_\_\_

- ☐ Location marked on topographic map (please attach)
- ☐ Location marked on air photo (please attach)

The Department of Ecology does NOT Warranty the Data and/or the Information on this Well Report.

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WELL CHARACTERISTICS

Physical Description of well (size or casing type or well housing etc)

(OFF WHITE)

8" CASING INSIDE CONCRETE TILE - ADJ TO SRC #1, A TRAILER  
(GREY)  
P.H AND RES LARGE AREA W/CYCLONE FENCE AROUND

Location or Well Identification Tag

Casing

Is supplemental tag needed for ease of identifying well?

☐

Yes

☒

No

Where was tag placed?

D	C	B	A
E	F	G	H
M	L	K	J
N	P	Q	R

Scale 1 24 000 (1 =2 000')

Indicate the location of the well within the Section by drawing a dot at that point.

SECTION \_\_\_\_\_

Comments

FOR ECOLOGY WATER RESOURCES PROGRAM ONLY

Right # \_\_\_\_\_

Date Issued \_\_\_\_\_

One Application Permit Certificate Claim Exempt